FLAG REQUEST

Your Name:				
Your Phone:				
Please mail flag to:				
Name:				
Address:				
City:			Zip:	
	Тур	e of flag requested - p	please circle	
	(Price inclu	ıdes: cost of flag, flyi	ng fee, & postage)	
	3' x 5'	Nylon Flag	\$17.00	
	3' x 5'	Cotton Flag	\$17.25	
	4' x 6'	Nylon Flag	\$21.50	
	5' x 8'	Nylon Flag	\$26.00	
	5' x 8'	Cotton Flag	\$29.20	
A flag flown over the Ca	apitol will be acc	companied by a certific	cate stating the date it	was flown and for
what, if any, occasion. I	Please include th	nat information below.		
Date to be Flown:				
Purpose:				
Please make check or me	oney order paya	ble to "Congressman	Harold Ford Jr.'s Of	fice Supply
Account" and mail this	form to 325 Ca	nnon House Office Bu	uilding, Washington, DO	C 20515, Attention
Flag Coordinator. After	the flag has flo	wn, please allow 4-6 v	weeks for delivery. Tha	nk you for allowing
me to assist you in this r	matter.			
Sincerely,				
Harold Ford, Jr.				

Member of Congress